

# Report of Inspection

at the request of

## The Private Alternative Adolescent Residential Program

**Program:** Building Bridges  
100 Graves Creek Rd  
Thompson Falls MT

**Inspector:** Amber Carpenter  
William W. Wood

**Date of Inspection:** May 17, 2016

### Site Inspection:

1.

Y

N



Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

**Comments:** Building Bridges is an alternative residential program for boys ranging in age from 14 to 18 years old. The program attempts to integrate the students back into the public school system where they will have normal interactions and peer pressure with the tools to deal with those issues.

2.



The number of program participants is consistent with information submitted with application and provided by Administrator.

**Comments:** 16 students are in residence at this time.

3.

☐☒

Premise does not contain an area that could be used for corporal punishment, isolation or the ability to inflict physical pain as a disciplinary measure.

Comments: No area was viewed. This information was confirmed through staff and participant interviews.

4.

☒☐

Buildings are equipped with fire extinguishers, emergency exits plans and smoke detectors that are placed conspicuously.

Comments: Fire extinguishers and smoke detectors where present in both houses.

5.

☒☐

Any noted deficiencies in most recent Deputy State Fire Marshalls report have been addressed.

Comments: None.

6.

☒☐

Program facilities are free from any major notable safety hazards or defects.

Comments: No major hazards noted.

7.

☒☐

If program is required to have periodic water quality testing and septic maintenance, verify these inspections are current.

Comments: Septic system pumped annually.

8.

☒☐

Facility contains an adequately supplied first aid kit which is maintained and in good working order.

Comments: First aid kit in staff office.

9.

☒☐

Area medications are stored is a controlled area with limited access.

Comments: Medications are kept in locked staff room. Access to this room is limited to certain staff.

10.

☒

Food preparation and serving areas are adequate to ensure nutritional needs of participants are met.

Comments: All areas appeared adequate. Boys rotate as a group to make pre-planned dinners.

11.

☒☐

Food preparation areas are operated in a clean and safe manner with all equipment, storage and serving tools in good working order.

Comments:

12.

☒☐

Vehicles used to transport participants and staff has emergency information contained in the vehicle. (Name, address, telephone of program and emergency phone numbers)

Comments:

13.

☐☒

Verified if any newly constructed buildings or remodeling has been done with the last 18-24 months. If so, determine if building, plumbing and electrical permits were received and proper inspections done upon completion of project.

Comments:

#### Administrator Interview:

1.

Y

N

☒☐

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments: Random searches through the backpacks of kids attending public school occurs and random tests for drugs.

2.

☒☐

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments: Everything appeared to be in order.

3.

☒ ☐

Reviewed with Administrator at least two program participants files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments: Kept in administrative offices, limited access.

4.

☒ ☐

Reviewed with Administrator at least two program participant's files to verify that each has an individual treatment plan in place. (at least one different from above two)

Comments: Individual plans and therapy notes were contained in the files.

5.

☒ ☐

Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.

Comments: Medication log was current.

6.

☒ ☐

Verify with Administrator that copies of all professional staff certifications are maintained on the premise.

Comments: Professional staff certifications contained in the files Inspectors examined.

#### Staff Interviews – only one staff member available for interview:

1.

Y N

☒ ☐

Staff explained definition of inappropriate and appropriate behaviors of program participants.

Comments:



2.

☐

Staff explained acceptable and unacceptable responses to inappropriate behaviors as well as acceptable consequences to inappropriate behaviors.

Comments:

Rewards for working their program include greater trust, internet and email privileges, there is not level system.

3.

☐

Staff verified training in these areas has occurred and does reoccur at least annually.

Comments:

Staff is provided with a packet of goals and rules of the program. All staff CPR trained and get on the job training for specific issues.

4.

☐

Staff verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

Staff indicated that students do perform physical labor but that the purpose is for therapeutic purposes – energy hours and overtime.

5.

☐

Staff verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

6.

☐

Staff verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments:

7.

☐

Staff verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments:

8.

☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Not used.

9.

☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: Staff verified medication is only dispensed as prescribed.

10.

☐

Staff verified all punishment given to a participant is done with at least two staff members present.

Comments: No physical punishment occurs.

11.

☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: Staff verified this does not occur.

12.

☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments:

13.

☐

Staff explained use of short term time out for behavior modification methods employed at the facility.

Comments:

14.

☐

Staff explained procedures for handling emergency situations such as suicide threat/attempt, assault or runaway.

Comments: Emergency numbers are posted, assign a buddy to be with them at all time. Will send to facility if needed and then bring back to program when more stable.

## Participant Interviews – combined answers of two participants

1.

Y

N

☒☐

Participant explained how staff deals with inappropriate and appropriate behaviors of program participants.

Comments:

Students mentioned progression through 12 step program and getting privileges such as email and ipod when they are meeting the expectations of the program.

2.

☒☐

Participant acknowledges have access to routine and emergent medical services as needed, including mental health services.

Comments:

Both students agreed services are available. Mental health services occur during regular weekly sessions and nightly group.

3.

☒☐

Verified participant received handbook outlining expectations and acceptable standards of the program.

Comments:

A print out of the rules was gone through when first arrived.

4.

☒☐

Participant verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

Students indicated that the work projects are part of their therapy and a learning experience.

5.

☒☐

Participant verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

Food is good.

6.

☒☐

Participant verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments:

Does not occur. Good relationship with staff.

7. ☒ ☐ Participant verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments:

8. ☒ ☐ Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: No such place.

9. ☒ ☐ The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services in not done.

Comments: Does not happen.

10. ☒ ☒ Participant verified all punishment given to a participant is done with at least two staff members present. Determine if corporal punishment is used.

Comments: Physical punishment does not occur.

11. ☒ ☐ Physical or mental suffering including pain to force compliance does not occur.

Comments: Does not happen.

12. ☒ ☐ The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: No physical.

13. ☒ ☐ Participant explained use of short term time out for behavior modification methods employed at the facility.

Comments:

# Report of Inspection

at the request of

## The Private Alternative Adolescent Residential Program

**Program:** Clearview  
Barefoot Lane  
Heron MT

**Inspector:** Amber Carpenter  
William W. Wood

**Date of Inspection:** May 18, 2016

### Site Inspection:

1.

Y

N



Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

Comments:

12 month residential program for girls. No changes to operation except for the size.

2.



The number of program participants is consistent with information submitted with application and provided by Administrator.

Comments:

33 students are in residence at this time.

3.

☐☒

Premise does not contain an area that could be used for corporal punishment, isolation or the ability to inflict physical pain as a disciplinary measure.

Comments: No area was viewed. This information was confirmed through staff and participant interviews.

4.

☒☐

Buildings are equipped with fire extinguishers, emergency exits plans and smoke detectors that are placed conspicuously.

Comments: Fire extinguishers and smoke detectors where present in both houses.

5.

☒☐

Any noted deficiencies in most recent Deputy State Fire Marshalls report have been addressed.

Comments: No recent inspection has been completed – may need inspection due to new addition to building.

6.

☒☐

Program facilities are free from any major notable safety hazards or defects.

Comments: No major hazards noted.

7.

☒☐

If program is required to have periodic water quality testing and septic maintenance, verify these inspections are current.

Comments: Septic system pumped annually.

8.

☒☐

Facility contains an adequately supplied first aid kit which is maintained and in good working order.

Comments: First aid kit in staff office.

9.

☒☐

Area medications are stored is a controlled area with limited access.

Comments: Medications are kept in locked staff room. Access to this room is limited to certain staff.

10

☐

Food preparation and serving areas are adequate to ensure nutritional needs of participants are met.

Comments: All areas appeared adequate.

11.

☐☐

Food preparation areas are operated in a clean and safe manner with all equipment, storage and serving tools in good working order.

Comments:

12.

☐☐

Vehicles used to transport participants and staff has emergency information contained in the vehicle. (Name, address, telephone of program and emergency phone numbers)

Comments:

13.

☐☐

Verified if any newly constructed buildings or remodeling has been done with the last 18-24 months. If so, determine if building, plumbing and electrical permits were received and proper inspections done upon completion of project.

Comments: New construction has occurred. Permits were not pulled and no inspections had been completed at the time of the inspection. Direction was given on how to remedy the situation.

### Administrator Interview:

1.

Y

N

☐☐

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments:

2.

☐☐

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments: Everything appeared to be in order.

3.

☒ ☐

Reviewed with Administrator at least two program participants files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments: Kept in administrative offices, limited access.

4.

☒ ☐

Reviewed with Administrator at least two program participant's files to verify that each has an individual treatment plan in place. (at least one different from above two)

Comments: Individual plans and therapy notes were contained in the files.

5.

☒ ☐

Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.

Comments: Medication log was current.

6.

☒ ☐

Verify with Administrator that copies of all professional staff certifications are maintained on the premise.

Comments: Professional staff certifications contained in the files Inspectors examined.

#### Staff Interviews – only one staff member available for interview:

1.

Y N

☒ ☐

Staff explained definition of inappropriate and appropriate behaviors of program participants.

Comments:



2.

☐

Staff explained acceptable and unacceptable responses to inappropriate behaviors as well as acceptable consequences to inappropriate behaviors.

Comments:

Rewards for working their program include greater trust, internet and email privileges.

3.

☐

Staff verified training in these areas has occurred and does reoccur at least annually.

Comments:

Staff is provided with a packet of goals and rules of the program. All staff CPR trained and get on the job training for specific issues.

4.

☐

Staff verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

Staff indicated that students do perform physical labor but that the purpose is for therapeutic purposes.

5.

☐

Staff verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

6.

☐

Staff verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments:

7.

☐

Staff verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments:

8.

☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Not used.

9.

☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: Staff verified medication is only dispensed as prescribed.

10.

☐

Staff verified all punishment given to a participant is done with at least two staff members present.

Comments: No physical punishment occurs.

11.

☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: Staff verified this does not occur.

12.

☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments:

13.

☐

Staff explained use of short term time out for behavior modification methods employed at the facility.

Comments:

14.

☐

Staff explained procedures for handling emergency situations such as suicide threat/attempt, assault or runaway.

Comments: Emergency numbers are posted.

## Participant Interviews – combined answers of two participants

1.

Y

N

☒☐

Participant explained how staff deals with inappropriate and appropriate behaviors of program participants.

Comments:

Have a system that staff and participants "vote up" based on behavior.

2.

☒☐

Participant acknowledges have access to routine and emergent medical services as needed, including mental health services.

Comments:

Yes, see therapist and have seen others taken to doctor as needed.

3.

☒☐

Verified participant received handbook outlining expectations and acceptable standards of the program.

Comments:

4.

☒☐

Participant verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

5.

☒☐

Participant verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

6.

☒☐

Participant verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments:

Both stated it is not normal for staff to lose their patience, do have some human errors but is used to help staff be trained also.

7. ☒ ☐ Participant verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments:

8. ☒ ☐ Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Nothing like that exists.

9. ☒ ☐ The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services in not done.

Comments:

10. ☒ ☒ Participant verified all punishment given to a participant is done with at least two staff members present. Determine if corporal punishment is used.

Comments:

11. ☒ ☐ Physical or mental suffering including pain to force compliance does not occur.

Comments:

12. ☒ ☐ The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments:

13. ☒ ☐ Participant explained use of short term time out for behavior modification methods employed at the facility.

Comments:

# Report of Inspection

at the request of

## The Private Alternative Adolescent Residential Program

**Program:** Explorations  
119 South Hills Rd  
Trout Creek MT

**Inspector:** Amber Carpenter  
William W. Wood

**Date of Inspection:** May 17, 2016

### Site Inspection:

1.

Y

N



Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

**Comments:** 12 month residential program for boys and girls. Have begun a wilderness type program which reflects a change to their operation plan – they agreed they would send this change into the board office.

2.



The number of program participants is consistent with information submitted with application and provided by Administrator.

**Comments:** 9 students are in residence at this time, 6 boys and 3 girls.

3.

☐☒

Premise does not contain an area that could be used for corporal punishment, isolation or the ability to inflict physical pain as a disciplinary measure.

Comments: No area was viewed. This information was confirmed through staff and participant interviews.

4.

☒☐

Buildings are equipped with fire extinguishers, emergency exits plans and smoke detectors that are placed conspicuously.

Comments: Fire extinguishers and smoke detectors where present in both houses.

5.

☒☐

Any noted deficiencies in most recent Deputy State Fire Marshalls report have been addressed.

Comments: None.

6.

☒☐

Program facilities are free from any major notable safety hazards or defects.

Comments: No major hazards noted.

7.

☒☐

If program is required to have periodic water quality testing and septic maintenance, verify these inspections are current.

Comments: Septic system pumped annually.

8.

☒☐

Facility contains an adequately supplied first aid kit which is maintained and in good working order.

Comments: First aid kit in staff office.

9.

☒☐

Area medications are stored in a controlled area with limited access.

Comments: Medications are kept in locked staff room. Access to this room is limited to certain staff.

10.

☒

Food preparation and serving areas are adequate to ensure nutritional needs of participants are met.

Comments: All areas appeared adequate.

11.

☒☐

Food preparation areas are operated in a clean and safe manner with all equipment, storage and serving tools in good working order.

Comments:

12.

☒☐

Vehicles used to transport participants and staff has emergency information contained in the vehicle. (Name, address, telephone of program and emergency phone numbers)

Comments:

13.

☐☒

Verified if any newly constructed buildings or remodeling has been done with the last 18-24 months. If so, determine if building, plumbing and electrical permits were received and proper inspections done upon completion of project.

Comments:

#### Administrator Interview:

1.

Y

N

☒☐

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments: Random searches through the backpacks of kids attending public school occurs and random tests for drugs.

2.

☒☐

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments: Everything appeared to be in order.

3.

☐

Reviewed with Administrator at least two program participants files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments: Kept in administrative offices, limited access.

4.

☐

Reviewed with Administrator at least two program participant's files to verify that each has an individual treatment plan in place. (at least one different from above two)

Comments: Individual plans and therapy notes were contained in the files.

5.

☐

Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.

Comments: Medication log was current.

6.

☐

Verify with Administrator that copies of all professional staff certifications are maintained on the premise.

Comments: Professional staff certifications contained in the files Inspectors examined.

#### Staff Interviews – only one staff member available for interview:

1.

Y

N

☐

Staff explained definition of inappropriate and appropriate behaviors of program participants.

Comments:



2.

☐

Staff explained acceptable and unacceptable responses to inappropriate behaviors as well as acceptable consequences to inappropriate behaviors.

Comments:

Rewards for working their program include greater trust, internet and email privileges, there is not level system.

3.

☐

Staff verified training in these areas has occurred and does reoccur at least annually.

Comments:

Staff is provided with a packet of goals and rules of the program. All staff CPR trained and get on the job training for specific issues.

4.

☐

Staff verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

Staff indicated that students do perform physical labor but that the purpose is for therapeutic purposes.

5.

☐

Staff verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

6.

☐

Staff verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments:

7.

☐

Staff verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments:

8.

☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Not used.

9.

☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: Staff verified medication is only dispensed as prescribed.

10.

☐

Staff verified all punishment given to a participant is done with at least two staff members present.

Comments: No physical punishment occurs.

11.

☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: Staff verified this does not occur.

12.

☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments:

13.

☐

Staff explained use of short term time out for behavior modification methods employed at the facility.

Comments:

14.

☐

Staff explained procedures for handling emergency situations such as suicide threat/attempt, assault or runaway.

Comments: Emergency numbers are posted.

## Participant Interviews – combined answers of two participants

1.

Y

N

☒☐

Participant explained how staff deals with inappropriate and appropriate behaviors of program participants.

Comments: No students available for interview at the time of visit.

2.

☒☐

Participant acknowledges have access to routine and emergent medical services as needed, including mental health services.

Comments:

3.

☒☐

Verified participant received handbook outlining expectations and acceptable standards of the program.

Comments:

4.

☒☐

Participant verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

5.

☒☐

Participant verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

6.

☒☐

Participant verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments:

7.

☐

Participant verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments:

8.

☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments:

9.

☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services in not done.

Comments:

10.



Participant verified all punishment given to a participant is done with at least two staff members present. Determine if corporal punishment is used.

Comments:

11.

☐

Physical or mental suffering including pain to force compliance does not occur.

Comments:

12.

☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments:

13.

☐

Participant explained use of short term time out for behavior modification methods employed at the facility.

Comments:

# **Report of Inspection**

at the request of

## **The Private Alternative Adolescent Residential Program**

**Program:** Gateway Freedom Ranch  
937 Skyview Lane  
Rexford MT 59930

**Inspector:** William W. Wood  
T.J. Hunt

**Date of Inspection:** June 28, 2016

**Date of Report:** July 14, 2016

Site Inspection:

1.

Y

N

☒☐

Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

Comments:

Gateway Freedom Ranch (GFR) is a Christian therapeutic boarding school/home for at risk females age 9-14.

2.

☒☐

The number of program participants is consistent with information submitted with application and provided by Administrator.

Comments:

The current number of girls is 10.

3.

☐☒

Premise does not contain an area that could be used for corporal punishment, isolation or the ability to inflict physical pain as a disciplinary measure.

Comments:

No area was viewed. This information was confirmed through staff and participant interviews.

4.

☒☒

Buildings are equipped with fire extinguishers, emergency exits plans and smoke detectors that are placed conspicuously.

Comments:

The buildings contained smoke detectors and emergency exit plans.

5.

☒☒

Any noted deficiencies in most recent Deputy State Fire Marshalls report have been addressed.

Comments:

Deputy State Fire Marshall has not inspected the facility. Administrator has called to schedule an inspection but has not received return calls.

6.

☒☐

Program facilities are free from any major notable safety hazards or defects.

Comments:

None observed

7.

☐

If program is required to have periodic water quality testing and septic maintenance, verify these inspections are current.

Comments: All Current.

8.

☐

Facility contains an adequately supplied first aid kit which is maintained and in good working order.

Comments:

9.

☐

Area medications are stored in a controlled area with limited access.

Comments: Medications are dispensed by house parent.

10.

☐

Food preparation and serving areas are adequate to ensure nutritional needs of participants are met.

Comments: All areas appeared adequate.

11.

☐

Food preparation areas are operated in a clean and safe manner with all equipment, storage and serving tools in good working order.

Comments: All areas appeared clean. Equipment and tools seemed in good working order.

12.

☐

Vehicles used to transport participants and staff has emergency information contained in the vehicle. (Name, address, telephone of program and emergency phone numbers)

Comments: Inspectors verified through administrator interview a "jump kit" containing emergency information and releases are kept in the van.

13.



Verified if any newly constructed buildings or remodeling has been done with the last 18-24 months. If so, determine if building, plumbing and electrical permits were received and proper inspections done upon completion of project.

Comments:

Facility will be moving to a new location on July 18, 2016. Inspectors performed a walk-through of this site. Construction and renovations were currently being conducted at the site and is not housing any children at this time. Building codes inspector has issued a permit for this facility.



### Administrator Interview:

1.

Y

N

☒☐

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments: All of the belongings are gone through at the time they arrive.

2.

☒☐

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments: Kept in director's office with limited access. No evidence of background checks was found in the personnel files. Administration advised they have an issue with the current PAARP system of background checking is they send in the fingerprint cards but never receive any response from PAARP whether the background check was received or whether it was a satisfactory check. A letter from PAARP advising the check was received and non-adverse would be a welcome change to the current system.

3.

☒☐

Reviewed with Administrator at least two program participant's files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments: Kept in locked cabinet with limited access. Appear to be in order.

4.

☒☐

Reviewed with Administrator at least two program participant's files to verify that each has an individual treatment plan in place. (at least one different from above two)

Comments:

5.

☒☐

Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.

Comments: Medication log was current.

6.

☒☐

Verify with Administrator that copies of all professional staff certifications are maintained on the premise.

Comments:

Staff Interviews – combined answers of two staff:

1.

Y

N

☒☐

Staff explained definition of inappropriate and appropriate behaviors of program participants.

Comments: It was explained by staff that a level system is used.

2.

☒☐

Staff explained acceptable and unacceptable responses to inappropriate behaviors as well as acceptable consequences to inappropriate behaviors.

Comments: Students are talked to when they break rules and may be given exercise time.

3.

☒☐

Staff verified training in these areas has occurred and does reoccur at least annually.

Comments: Staff attends weekly staff meetings, training for dealing with issues occurs thought there year as things come up.

4.

☒☐

Staff verified the purpose of physical labor (not for the sole purpose of punishment).

Comments: Staff indicated that students do perform physical labor but that the sole purpose is not for punishment.

5.

☒☐

Staff verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments: Food, clothing and other necessities are not withheld from students.

6.

☐

Staff verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments: Staff indicated this type of behavior is not tolerated.

7.

☐

Staff verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments: Staff verified this was accurate and that if communication was not going to occur for some reason at the regular time staff would contact parents.

8.

☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Not used. Students may be asked to sit the hall if disruptive at school for a period of time or, as mentioned above, may be required to sit in the corner for a period of time.

9.

☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services in not done.

Comments: Staff verified medication is only dispensed as prescribed.

10.

☐

Staff verified all punishment given to a participant is done with at least two staff members present.

Comments: No physical punishment occurs. Punishments are by loss of privileges through the level system.

11.

☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: Staff verified this does not occur, again the programs approach is a hands-off.

12.

☒ ☐ The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: Administration is currently researching a MANDT class for staff and making proper arrangements.

13. ☒ ☐ Staff explained use of short term time out for behavior modification methods employed at the facility.

Comments: Staff explained short term time out through exercise as described above.

14. ☒ ☐ Staff explained procedures for handling emergency situations such as suicide threat/attempt, assault or runaway.

Comments: Emergency numbers are posted in all classrooms and houses.

### Participant Interviews – combined answers of two participants

1.  
Y N  
☒ ☐ Participant explained how staff deals with inappropriate and appropriate behaviors of program participants.

Comments: The students confirmed that they will talk to them about not following the rules or they may drop a level depending on how severe it is. For appropriate behaviors they will increase levels and get more privileges.

2. ☒ ☐ Participant acknowledges have access to routine and emergent medical services as needed, including mental health services.

Comments: Both students agreed service are available.

3. ☒ ☐ Verified participant received handbook outlining expectations and acceptable standards of the program.

Comments:

4



Participant verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

5.



Participant verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

6.



Participant verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments: This type of behavior does not occur.

7.



Participant verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments: Communication with parents is an essential part of the program.

8



Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Does not happen.

9.



The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: Medication is dispensed only as prescribed.

10. ☒ ☐ Participant verified all punishment given to a participant is done with at least two staff members present. Determine if corporal punishment is used.

Comments: Physical punishment does not happen.

11. ☒ ☐ Physical or mental suffering including pain to force compliance does not occur.

Comments: No.

12. ☒ ☐ The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments:

13. ☒ ☐ Participant explained use of short term time out for behavior modification methods employed at the facility.

Comments: description of this and passive restraint process matched that of staff.







# **Report of Inspection**

at the request of

## **The Private Alternative Adolescent Residential Program**

**Program:** Mountain Meadow Youth Ranch  
391 Big Beaver Creek Rd  
Trout Creek, Mt. 59874  
(406) 827-1957

**Inspector:** William W. Wood  
T. J. Hunt

**Date of Inspection:** August 29, 2016

**Date of Report:** September 7, 2016



Site Inspection:

1.

Y

N

☒☐

Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

Comments:

Mountain Meadow Youth Ranch is a boy's only program. The boy's reside in the residence of Joe and Marilyn Frields, Directors and Owners, and attend public schools in Thompson Falls. No changes to the facility since the last inspection were observed during the walkthrough.

2.

☒☐

The number of program participants is consistent with information submitted with application and provided by Administrator.

Comments:

The current number of children is 9.

3.

☐☒

Premise does not contain an area that could be used for corporal punishment, isolation or the ability to inflict physical pain as a disciplinary measure.

Comments:

No area was viewed. This information was confirmed through staff and participant interviews.

4.

☒☐

Buildings are equipped with fire extinguishers, emergency exits plans and smoke detectors that are placed conspicuously.

Comments:

Facility is equipped with fire extinguishers however inspector was informed they were purchased at Costco and did not have an inspection tag. Written emergency exit plan was posted, however, no map indicating escape route was present.

5

☒☐

Any noted deficiencies in most recent Deputy Fire Marshall report have been addressed.

Comments:

6.

☐☒

Program facilities are free from any major notable safety hazards or defects.

Comments: No noted hazards or defects.

7.

☒☐

If program is required to have periodic water quality testing and septic maintenance, verify these inspections are current.

Comments: A copy of a well testing report was presented at the time of inspection with no deficiencies noted on the report.

8.

☒☐

Facility contains an adequately supplied first aid kit which is maintained and in good working order.

Comments:

9.

☒☐

Area medications are stored in a controlled area with limited access.

Comments: Medications are stored in master bedroom closet. The closet has the ability to be locked, however, at time of inspection it was unlocked and the medication container was a plastic first aid kit type container, no medication record was viewed. Joe Fields, program director, advised he was aware of the requirement to keep meds locked up and to keep a medication record.

10.

☒☐

Food preparation and serving areas are adequate to ensure nutritional needs of participants are met.

Comments: All areas appeared adequate.

11.

☒☐

Food preparation areas are operated in a clean and safe manner with all equipment, storage and serving tools in good working order.

Comments: All areas appeared clean. Equipment and tools seemed in good working order.

12.

☒☐

Vehicles used to transport participants and staff have emergency information contained in the vehicle. (Name, address, telephone of program and emergency phone numbers)

Comments: Emergency information is contained in the vehicles.

13.

☐

Verified if any newly constructed buildings or remodeling has been done with the last 18-24 months. If so, determine if building, plumbing and electrical permits were received and proper inspections done upon completion of project.

Comments: No recent construction

### Administrator Interview:

1.

Y

N

☒☐

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments: New student's belongings and person are checked.

2.

☒☐

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments: No evidence of background checks was found in the personnel files. Administration advised they have been conducting their background checks and commented a problem they have with the current PAARP system of background checking is they send in the fingerprint cards but never receive any response from PAARP whether the background check was received or whether it was a satisfactory check. A letter from PAARP advising the check was received and non-adverse would be a welcome change to the current system.

3.

☒☐

Reviewed with Administrator at least two program participant's files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments: Kept in facility administrative office.

4.

☒☐

Reviewed with Administrator at least two program participant's files to verify that each has an individual treatment plan in place. (at least one different from above two)

Comments:

5.

☐☒

Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.

Comments: Medication log was not present.

6.

☐

Verify with Administrator that copies of all professional staff certifications are maintained on the premise.

Comments: Professional staff certifications contained in the files Inspectors examined.

Staff Interviews – combined answers of two staff:

1.

Y

N

☐

Staff explained definition of inappropriate and appropriate behaviors of program participants.

Comments: Inappropriate behavior was explained as not following the rules or not completing school work as assigned. While working within the rules and guidelines of the program was appropriate.

2.

☐

Staff explained acceptable and unacceptable responses to inappropriate behaviors as well as acceptable consequences to inappropriate behaviors.

Comments: Depends on the situation, something minor may just require speaking with the student. Serious infractions may result in being removed from group activities for a time.

3.

☐

Staff verified training in these areas has occurred and does reoccur at least annually.

Comments: Staff training is on-going.

4.

☐

Staff verified the purpose of physical labor (not for the sole purpose of punishment).

Comments: Staff indicated that physical labor for breaking rules is part of being a citizen in the community, however labor is to be a benefit to the house.

5.

☐

Staff verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments: Food, clothing and other necessities are not withheld from students.

6.

☒☐

Staff verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments: Staff indicated this type of behavior is not tolerated.

7.

☒☐

Staff verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments: Staff explained communication not withheld for punishment

8.

☒☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Not used

9.

☒☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services in not done.

Comments: Staff verified medication is only dispensed as prescribed.

10.

☒☐

Staff verified all punishment given to a participant is done with at least two staff members present.

Comments: No physical punishment occurs. Punishments are by loss of privileges.

11.

☒☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: Staff verified this does not occur.

12.

- ☒ ☐ The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments:

13. ☒ ☐ Staff explained use of short term time out for behavior modification methods employed at the facility.

Comments:

14. ☒ ☐ Staff explained procedures for handling emergency situations such as suicide threat/attempt, assault or runaway.

Comments: Procedures include suicide watch and runaway watch, also appropriate local authorities are contacted as needed.

### Participant Interviews – combined answers of two participants

1.  
Y N  
☒ ☐ Participant explained how staff deals with inappropriate and appropriate behaviors of program participants.

Comments: The students confirmed warning for minor issues. Privileges are gained for appropriate behavior and receive consequences for inappropriate behavior. The consequences are tailored to the individual. Students may be restricted from other students if being a negative influence.

2. ☒ ☐ Participant acknowledges they have access to routine and emergency medical services as needed, including mental health services.

Comments: Both students agreed services are available.

3. ☒ ☐ Verified participant received handbook outlining expectations and acceptable standards of the program.

Comments:

☒☐

Participant verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

---

---

☒☐

Participant verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

Not denied

---

☒☐

Participant verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments:

---

---

Y

N

☒☐

Participant verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments:

---

---

☒☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments:

---

---

☒☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.



Comments: \_\_\_\_\_  
\_\_\_\_\_

☒ ☐ Participant verified all punishment given to a participant is done with at least two staff members present. Determine if corporal punishment is used.

Comments: \_\_\_\_\_  
\_\_\_\_\_

☒ ☐ Physical or mental suffering including pain to force compliance does not occur.

Comments: \_\_\_\_\_  
\_\_\_\_\_

☒ ☐ The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: Student had witnessed one incident requiring the use of passive restraint.  
\_\_\_\_\_

Y N  
☒ ☐ Participant explained use of short term time out for behavior modification methods employed at the facility.

Comments: \_\_\_\_\_  
\_\_\_\_\_

# **Report of Inspection**

at the request of

## **The Private Alternative Adolescent Residential Program**

**Program:** New Horizons Boys Ranch  
6442 W Kootenai Rd.  
Rexford, MT 59930  
(406) 889-5995

**Inspector:** William W. Wood  
T. J. Hunt

**Date of Inspection:** June 28, 2016

**Date of Report:** July 14, 2016

Site Inspection:

1.

Y

N

☒☒

Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

Comments: New Horizons Youth Ranch is a alternative residential program for boys. The students at the Youth Ranch have issues with ADD/ADHD, drugs, self esteem and fetal alcohol syndrome. The Youth Ranch is set up family style. The program is a non-denominational Christian program. There are approximately 11 staff.

2.

☒☐

The number of program participants is consistent with information submitted with application and provided by Administrator.

Comments:

The current number of children is 17 ages 10-17.

3.

☐☒

Premise does not contain an area that could be used for corporal punishment, isolation or the ability to inflict physical pain as a disciplinary measure.

Comments:

No area was viewed.

4.

☒☐

Buildings are equipped with fire extinguishers, emergency exits plans and smoke detectors that are placed conspicuously.

Comments:

Fire extinguishers, emergency exit plans, and smoke detectors were present in all buildings. Fire extinguishers do not appear to be recently inspected and look to have been bought from a retail store.

5.

☒☐

Any noted deficiencies in most recent Deputy Fire Marshall report have been addressed.

Comments:

The Deputy State Fire Marshall has not been contacted.

6.

☐ ☒ Program facilities are free from any major notable safety hazards or defects.

Comments: See Attached

7.

☐ ☒ If program is required to have periodic water quality testing and septic maintenance, verify these inspections are current.

Comments: See Attached

8.

☐ ☐ Facility contains an adequately supplied first aid kit which is maintained and in good working order.

Comments: One was not viewed by inspectors.

9.

☒ ☐ Area medications are stored in a controlled area with limited access.

Comments: Medications are kept in staff office and dispensed by staff.

10.

☒ ☐ Food preparation and serving areas are adequate to ensure nutritional needs of participants are met.

Comments: All areas appeared adequate.

11.

☒ ☐ Food preparation areas are operated in a clean and safe manner with all equipment, storage and serving tools in good working order.

Comments: All areas appeared clean. Equipment and tools seemed in good working order.

12.

☒ ☐ Vehicles used to transport participants and staff has emergency information contained in the vehicle. (Name, address, telephone of program and emergency phone numbers)

Comments: Emergency information is contained in the vehicles.

13.

☐☒

Verified if any newly constructed buildings or remodeling has been done with the last 18-24 months. If so, determine if building, plumbing and electrical permits were received and proper inspections done upon completion of project.

Comments: See Attached Email

### Administrator Interview:

1.

Y

N

☒☐

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments: Program given written authorization to conduct searches for contraband. Searches are conducted when new students arrive.

2.

☒☐

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments: No evidence of background checks was found in the personnel files. Tom Harrell advised they do conduct the fingerprint checks as required but do not receive anything back to place in the files. The secretary, Legend, was not record checked as Tom stated he has known her for a long time.

3.

☒☐

Reviewed with Administrator at least two program participant's files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments: Kept in locked cabinet with limited access.

4.

☒☐

Reviewed with Administrator at least two program participant's files to verify that each has an individual treatment plan in place. (at least one different from above two)

Comments: No treatment plan in file.

5.

☒☐

Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.

Comments: Medication log was current.

6.

☒☐

Verify with Administrator that copies of all professional staff certifications are maintained on the premise.

Comments: No certifications viewed in the files. Most of the staff are CPR trained.

Staff Interviews – combined answers of two staff:

1.

Y

N

☒☐

Staff explained definition of inappropriate and appropriate behaviors of program participants.

Comments: Inappropriate behavior was explained as not following the rules or not completing school work or therapy as assigned. While working within the rules and guidelines of the program was appropriate.

2.

☒☐

Staff explained acceptable and unacceptable responses to inappropriate behaviors as well as acceptable consequences to inappropriate behaviors.

Comments: Depends on the situation, something minor may just require speaking with the student. Example was given that if a student makes a mess in the indoor bathroom, the bathroom is locked and off-limits for all students, and an outdoor outhouse is the primary toilet for students.

3.

☒☐

Staff verified training in these areas has occurred and does reoccur at least annually.

Comments:

4.

☒☐

Staff verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

5.

☐

Staff verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments: Refer #2.

6.

☐

Staff verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments: Staff indicated this type of behavior is not tolerated.

7.

☐

Staff verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments: Staff explained communication not withheld for punishment.

8.

☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Not used

9.

☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: Staff verified medication is only dispensed as prescribed.

10.

☐☐

Staff verified all punishment given to a participant is done with at least two staff members present.

Comments:

11.

☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: Staff verified this does not occur.

12.

☒☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: Staff indicated they want to follow through with more passive restraint training. Not currently Mandt or CPI certified.

13.

☒☐

Staff explained use of short term time out for behavior modification methods employed at the facility.

Comments:

14.

☒☐

Staff explained procedures for handling emergency situations such as suicide threat/attempt, assault or runaway.

Comments: Have procedures in place.

#### Participant Interviews – combined answers of two participants

***\*\* Due to the change of time of inspection by the inspectors, there were no youth available to interview for the inspection due to a field trip.\*\****

1.

Y

N

☐☐

Participant explained how staff deals with inappropriate and appropriate behaviors of program participants.

Comments:

2.

☐☐

Participant acknowledges have access to routine and emergency medical services as needed, including mental health services.

Comments:



3.

☐☐

Verified participant received handbook outlining expectations and acceptable standards of the program.

Comments:

☐☐

Participant verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

---

---

☐☐

Participant verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

---

---

☐☐

Participant verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments:

---

---

Y      N

☐☐

Participant verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments: \_\_\_\_\_  
\_\_\_\_\_

☐☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: \_\_\_\_\_  
\_\_\_\_\_

☐☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services in not done.

Comments: \_\_\_\_\_  
\_\_\_\_\_

☐☐

Participant verified all punishment given to a participant is done with at least two staff members present. Determine if corporal punishment is used.

Comments: \_\_\_\_\_  
\_\_\_\_\_

☐☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: \_\_\_\_\_  
\_\_\_\_\_

☐☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: \_\_\_\_\_

Y

☐

N

☐

Participant explained use of short term time out for behavior modification methods employed at the facility.

Comments:

---

---

# **Report of Inspection**

at the request of

## **The Private Alternative Adolescent Residential Program**

**Program:** Ranch for Kids  
PO Box 790  
Eureka MT 59917

**Inspector:** William W. Wood  
T.J. Hunt

**Date of Inspection:** June 28, 2016

**Date of Report:** July 14, 2016

Site Inspection:

1.

Y

N

☒☒

Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

Comments: The Ranch for Kids (RFK) is a home for at risk adopted children (mainly international) who are having difficulty transitioning into their new adopted families and culture. There are no certified trained therapists or counselors on staff at the Ranch, all therapy services are contracted for separately by the parents with local therapist. The old Rexford School is under lease by RFK for the program facility. Housing is also contained within the school building.

2.

☒☐

The number of program participants is consistent with information submitted with application and provided by Administrator.

Comments: The current number is children is 26 (50% male & 50% female).

3.

☐☒

Premise does not contain an area that could be used for corporal punishment, isolation or the ability to inflict physical pain as a disciplinary measure.

Comments: Area does not exist. This information was confirmed through staff and participant interviews.

4.

☒☐

Buildings are equipped with fire extinguishers, emergency exits plans and smoke detectors that are placed conspicuously.

Comments: Fire extinguishers, emergency exit plans, smoke detectors, fire sprinkler systems, panic hardware and pull fire alarms were present.

5.

☒☒

Any noted deficiencies in most recent Deputy State Fire Marshalls report have been addressed.

Comments: The last inspection by the State Fire Marshall was two years ago. Advised to contact State Fire Marshall for inspection.

6.

☐

Program facilities are free from any major notable safety hazards or defects.

Comments: No issues noted in the Rexford School building.

7.

☐

If program is required to have periodic water quality testing and septic maintenance, verify these inspections are current.

Comments: All Current.

8.

☐

Facility contains an adequately supplied first aid kit which is maintained and in good working order.

Comments: Fist aid kits viewed at the Rexford School and appeared in good working order.

9.

☐

Area medications are stored is a controlled area with limited access.

Comments: Medications are dispensed by house parent and contained in locked cabinet at the Rexford School.

10.

☐

Food preparation and serving areas are adequate to ensure nutritional needs of participants are met.

Comments: All areas appeared adequate.

11.

☐

Food preparation areas are operated in a clean and safe manner with all equipment, storage and serving tools in good working order.

Comments: All areas appeared clean. Equipment and tools seemed in good working order.

12.

☐

Vehicles used to transport participants and staff has emergency information contained in the vehicle. (Name, address, telephone of program and emergency phone numbers)

Comments: Emergency information is not contained in the vehicles used for transport. Explanation was given that the information is available to medical facilities electronically at any given time. Also that medical releases are on file at the local medical facility. Staff cited HIPPA concerns in having the emergency information left in the vehicles.

13.



Verified if any newly constructed buildings or remodeling has been done with the last 18-24 months. If so, determine if building, plumbing and electrical permits were received and proper inspections done upon completion of project.

Comments: No new construction has occurred.

### Administrator Interview:

1.

Y

N

☒☐

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments:

Mr. Sutley explained staff member, Kathryn Volsky, is in charge of conducting searches for contraband of the children. All of the belongings are gone through at the time they arrive.

2.

☐☒

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments:

Copies of the fingerprint cards are present in the files as are the receipts for the fingerprinting.

3.

☒☐

Reviewed with Administrator at least two program participants files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments:

Kept in locked cabinet with limited access.

4.

☒☐

Reviewed with Administrator at least two program participant's files to verify that each has an individual treatment plan in place. (at least one different from above two)

Comments:

No specific therapy notes were contained in the files as therapist maintains that information. No individual treatment plans could be found in the files.

5.

☒☐

Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.

Comments:

Medication log was current.

6.



☐ ☒ Verify with Administrator that copies of all professional staff certifications are maintained on the premise.

Comments: Yes. Copies in the personnel files are well as Bill Sutley's yearly Mandt certifications framed on the wall.

### Staff Interviews – combined answers of two staff:

1.  
Y      N  
☒ ☐ Staff explained definition of inappropriate and appropriate behaviors of program participants.

Comments: It was explained by staff that a level system is used. The system includes four levels (00, 0, 1, and 2). 3 strikes of inappropriate behavior will move a student down a level. The range is from level 2's with full privileges to level 00.

2.  
☒ ☐ Staff explained acceptable and unacceptable responses to inappropriate behaviors as well as acceptable consequences to inappropriate behaviors.

Comments: Students are talked to when they break rules and are given strikes as explained above. Acceptable behavior means that you move up a level and are given more privileges.

3.  
☒ ☐ Staff verified training in these areas has occurred and does reoccur at least annually.

Comments:

4.  
☒ ☐ Staff verified the purpose of physical labor (not for the sole purpose of punishment).

Comments: They have their level system based on actions and consequences and those in lower levels may have additional chores assigned to them.

5.  
☒ ☐ Staff verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments: Food, clothing and other necessities are not withheld from students.

6. ☒ ☐ Staff verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments: Staff indicated this type of behavior is not tolerated.

7. ☒ ☐ Staff verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments: Staff explained communication not withheld for punishment.

8. ☒ ☐ Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Not used.

9. ☒ ☐ The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: Staff verified medication is only dispensed as prescribed.

10. ☒ ☐ Staff verified all punishment given to a participant is done with at least two staff members present.

Comments: No physical punishment occurs. Punishments are by loss of privileges through the level system.

11. ☒ ☐ Physical or mental suffering including pain to force compliance does not occur.

Comments: Staff verified this does not occur, again the programs approach is a hands-off.

12. ☒ ☐ The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: Staff is trained in MANDT, Mr. Sutley is a certified MANDT trainer.

13.

☒☐

Staff explained use of short term time out for behavior modification methods employed at the facility.

Comments: Staff explained short term time is utilized at times and is also requested by students at times.

14.

☒☐

Staff explained procedures for handling emergency situations such as suicide threat/attempt, assault or runaway.

Comments: Emergency numbers are posted.

### Participant Interviews – combined answers of two participants

1.

Y

N

☒☐

Participant explained how staff deals with inappropriate and appropriate behaviors of program participants.

Comments: The students confirmed that they will talk to them about not following the rules or they may drop a level depending on how severe it is. For appropriate behaviors they will increase levels and get more privileges.

2. ☒ ☐ Participant acknowledges have access to routine and emergency medical services as needed, including mental health services.

Comments: Mental health services are available.

3. ☒ ☐ Verified participant received handbook outlining expectations and acceptable standards of the program.

Comments: Both students were aware of the handbook.

4. ☒ ☐ Participant verified the purpose of physical labor (not for the sole purpose of punishment).

Comments: Students indicated they are involved in community service work and other projects.

5. ☒ ☐ Participant verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

6. ☒ ☐ Participant verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments:

7. ☒ ☐ Participant verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments:

8. ☐ ☒ Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Does not happen.

9.



The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: Does not happen.

10.



Participant verified all punishment given to a participant is done with at least two staff members present. Determine if corporal punishment is used.

Comments: Physical punishment does not occur. Level meetings occur with all staff and students present.

11.



Physical or mental suffering including pain to force compliance does not occur.

Comments: Does not happen.

12.



The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: Staff only uses passive restraint when necessary.

13.



Participant explained use of short term time out for behavior modification methods employed at the facility.

Comments: Students are segregated in the gym for short term time out.

# **Report of Inspection**

at the request of

## **The Private Alternative Adolescent Residential Program**

**Program:** Reflections Academy  
171 Harlow Rd.  
Thompson Falls, Mt. 59873

**Inspector(s):** William W. Wood  
T.J. Hunt

**Date of Inspection:** August 29, 2016

**Date of Report:** August 31, 2016

Site Inspection:

1.

Y

N

☒☐

Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

Comments:

Reflections is a new application that required an initial inspection prior to opening for business.

2.

☒☐

The number of program participants is consistent with information submitted with application and provided by Administrator.

Comments:

Michele Manning, Administrator, advised Reflections will be a girl's only program of 9 to 10 girls initially, with room for expansion.

3.

☐☒

Premise does not contain an area that could be used for corporal punishment, isolation or the ability to inflict physical pain as a disciplinary measure.

Comments:

No area was viewed.

4.

☒☐

Buildings are equipped with fire extinguishers, emergency exits plans and smoke detectors that are placed conspicuously.

Comments:

The building contained smoke detectors, fire extinguishers, and emergency exit plans. The upstairs balcony had an emergency ladder present approved by the Deputy State Fire Marshal.

5.

☒☒

Any noted deficiencies in most recent Deputy State Fire Marshalls report have been addressed.

Comments:

Dawn Drollinger, Deputy State Fire Marshall has recently conducted an inspection.

6.

☒☐

Program facilities are free from any major notable safety hazards or defects.

Comments:

None observed

7.



If program is required to have periodic water quality testing and septic maintenance, verify these inspections are current.

Comments:

8.



Facility contains an adequately supplied first aid kit which is maintained and in good working order.

Comments:

9.



Area medications are stored in a controlled area with limited access.

Comments: Medications will be in a locked cabinet inside a locked closet with a medication log present. The cabinet and log were shown to inspectors.

10.



Food preparation and serving areas are adequate to ensure nutritional needs of participants are met.

Comments: All areas appeared adequate.

11.



Food preparation areas are operated in a clean and safe manner with all equipment, storage and serving tools in good working order.

Comments: Facility was still being brought up to operating level but the large food prep area appeared to be sufficient and contained necessary food storage and equipment.

12.



Vehicles used to transport participants and staff has emergency information contained in the vehicle. (Name, address, telephone of program and emergency phone numbers)

Comments: Inspectors verified through interview with the administrator a "jump kit" containing emergency information and releases will be available during any transport of participants.

13.





Verified if any newly constructed buildings or remodeling has been done with the last 18-24 months. If so, determine if building, plumbing and electrical permits were received and proper inspections done upon completion of project.

Comments:

Some minor renovations are currently being performed. The Building Codes Inspector has recently visited the facility and performed an inspection.

### Administrator Interview:

1.

Y

N

☒☐

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments:

A policy and procedure handbook has been completed and provided with the application. Inspectors also examined the book on site.

2.

☒☐

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments:

As this is a new application Administrator, Michele Manning, advised there are no staff at this time. She advised fingerprint cards have been completed for proposed staff members and will be sent for record checks.

3.

☒☐

Reviewed with Administrator at least two program participant's files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments:

There are no participants at this time.

4.

☒☐

Reviewed with Administrator at least two program participant's files to verify that each has an individual treatment plan in place. (at least one different from above two)

Comments:

There are no participants at this time.

5.

☒☐

Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.

Comments:

Medication log is not in use at this time – awaiting participants.

6.



Verify with Administrator that copies of all professional staff certifications are maintained on the premise.

Comments: Training will be provided once staff has been employed.

Staff Interviews – combined answers of two staff:

There are no staff at this time – awaiting licensure.

Participant Interviews – combined answers of two participants

There are no participants at this time – awaiting licensure.

•







# **Report of Inspection**

at the request of

## **The Private Alternative Adolescent Residential Program**

**Program:** Sparrow's Nest of Northwest Montana  
P.O. Box 8384  
Kalispell, MT 59904  
(406) 309-5196

**Inspector:** William W. Wood  
T. J. Hunt

**Date of Inspection:** June 29, 2016

**Date of Report:** July 14, 2016

Site Inspection:

1.

Y

N

☒☐

Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

Comments:

Sparrow's Nest is a new application and this was an initial inspection. Due to time constraints, the plan of operation was not viewed prior to the inspection. Therefore, the following is a narrative of the basic operation as explained to the Inspectors at the time of the inspection.

Sparrow's nest is a non-profit facility with the purpose of housing and providing resources to homeless high school students who want to attend school and graduate. They have two facilities one located in Kalispell (currently under construction) and one in Whitefish which is ready to operate upon approval.

2.

☐☐

The number of program participants is consistent with information submitted with application and provided by Administrator.

Comments:

N/A

3.

☒☐

Premise does not contain an area that could be used for corporal punishment, isolation or the ability to inflict physical pain as a disciplinary measure.

Comments:

4.

☒☐

Buildings are equipped with fire extinguishers, emergency exits plans and smoke detectors that are placed conspicuously.

Comments:

Fire plan and extinguishers were posted. Although it should be noted the fire extinguishers appear not to be commercial grade.

5.

☐☐

Any noted deficiencies in most recent Deputy Fire Marshall report have been addressed.

Comments:

Currently working towards inspection by local fire marshal.

6. ☒ ☐ Program facilities are free from any major notable safety hazards or defects.

Comments:

7. ☒ ☐ If program is required to have periodic water quality testing and septic maintenance, verify these inspections are current.

Comments: City water & sewer

8. ☒ ☐ Facility contains an adequately supplied first aid kit which is maintained and in good working order.

Comments:

9. ☐ ☒ Area medications are stored in a controlled area with limited access.

Comments: Although no youth are currently being housed, the program did not have a specific plan for storing and administering medications. Written policy and procedure is recommended. Staff was agreeable this needs to be addressed and will be in compliance with rules.

10. ☒ ☐ Food preparation and serving areas are adequate to ensure nutritional needs of participants are met.

Comments:

11. ☒ ☐ Food preparation areas are operated in a clean and safe manner with all equipment, storage and serving tools in good working order.

Comments:

12. ☐ ☐ Vehicles used to transport participants and staff has emergency information contained in the vehicle. (Name, address, telephone of program and emergency phone numbers)



Comments: Currently no vehicle but staff advised one may be donated in the future.

13.



Verified if any newly constructed buildings or remodeling has been done with the last 18-24 months. If so, determine if building, plumbing and electrical permits were received and proper inspections done upon completion of project.

Comments: Inspectors walked through Kalispell facility and confirmed it is not housing youth. Staff advised all necessary permits will be obtained.

**Note:** During the site visit of the Whitefish facility, it was indicated that both male and female youth will be housed on the same floor (2<sup>nd</sup>). Staff advised they would be putting security cameras upstairs as well having staff members present in the facility 24 hours a day.

### Administrator Interview:

1.

Y

N

☐☒

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments:

Staff discussed they have a procedure for new admittance. However, they did not identify how they will handle daily checks due to the youth leaving for school and programs. Staff indicated they would search youth upon suspicion.

2.

☒☐

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments:

In compliance.

3.

☐☐

Reviewed with Administrator at least two program participant's files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments:

N/A

4.

☐☐

Reviewed with Administrator at least two program participant's files to verify that each has an individual treatment plan in place. (at least one different from above two)

Comments:

N/A

5.

☐☐

Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.

Comments:

N/A- See response to question #9 in Site Inspection of this report.

6.

☒☐

Verify with Administrator that copies of all professional staff certifications are maintained on the premise.

Comments:

Staff Interviews – combined answers of two staff:

1.

Y

N

☐☐

Staff explained definition of inappropriate and appropriate behaviors of program participants.

Comments: N/A

2.

☐☐

Staff explained acceptable and unacceptable responses to inappropriate behaviors as well as acceptable consequences to inappropriate behaviors.

Comments: N/A

3.

☒☐

Staff verified training in these areas has occurred and does reoccur at least annually.

Comments: Staff working at Whitefish location advised he is trained in CPR/1<sup>st</sup> aide, disaster preparedness and HELP training through AWARE.

4.

☐☐

Staff verified the purpose of physical labor (not for the sole purpose of punishment).

Comments: N/A

5.

☐☐

Staff verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments: A walk through of Whitefish facility revealed adequate daily amenities.

6.

☐☐

Staff verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments: N/A

7.

☐☐

Staff verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments: N/A

8.

☐☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: N/A

9.

☐☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: N/A

10.

☐☐

Staff verified all punishment given to a participant is done with at least two staff members present.

Comments: N/A

11.

☐☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: N/A

12.

☐☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: N/A

13.

☐☐

Staff explained use of short term time out for behavior modification methods employed at the facility.

Comments:

14.

☒☐

Staff explained procedures for handling emergency situations such as suicide threat/attempt, assault or runaway.

Comments:

Participant Interviews – combined answers of two participants

**\*\*Participant Interviews were unable to be conducted as this was an initial inspection and the facility is not housing youth at this time. \*\***

1.

Y

N

☐☐

Participant explained how staff deals with inappropriate and appropriate behaviors of program participants.

Comments:

2.

☐☐

Participant acknowledges have access to routine and emergency medical services as needed, including mental health services.

Comments:

3.

☐☐

Verified participant received handbook outlining expectations and acceptable standards of the program.

Comments:

☐☐

Participant verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

---

---

☐☐

Participant verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments: \_\_\_\_\_  
\_\_\_\_\_

☐ ☐ Participant verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments \_\_\_\_\_  
\_\_\_\_\_

Y      N  
☐ ☐ Participant verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments: \_\_\_\_\_  
\_\_\_\_\_

☐ ☐ Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: \_\_\_\_\_  
\_\_\_\_\_

☐ ☐ The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: \_\_\_\_\_  
\_\_\_\_\_

☐ ☐ Participant verified all punishment given to a participant is done with at least two staff members present. Determine if corporal punishment is used.

Comments: \_\_\_\_\_

---

  
☐☐

Physical or mental suffering including pain to force compliance does not occur.

Comments:

☐☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments:

Y

☐

N

☐

Participant explained use of short term time out for behavior modification methods employed at the facility.

Comments:











# **Report of Inspection**

at the request of

## **The Private Alternative Adolescent Residential Program**

**Program:** Summit Preparatory School  
1605 Danielson Rd.  
Kalispell, Mt. 59901  
(406) 758-8100

**Inspector:** William W. Wood  
T. J. Hunt

**Date of Inspection:** June 27, 2016

**Date of Report:** July 14, 2016

## Site Inspection:

1.

Y

N

☒☒

Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

Comments:

Therefore, the following is a narrative of the basic operation as explained to the Inspectors at the time of the inspection.

Summit is a co-ed college preparatory school that is residential based with a focus on therapy and academics. Each student is assigned to a treatment team which consists of a masters level therapist, certified teacher, house parent and direct care staff. The school at Summit is accredited by OPI. The school is a 12 month school to allow students who may have fallen behind catch up in their academic studies. The average stay is 15 months and the students range in age from 14 to 19.

2.

☒☐

The number of program participants is consistent with information submitted with application and provided by Administrator.

Comments:

The current number of children is 59 to 60.

3.

☐☒

Premise does not contain an area that could be used for corporal punishment, isolation or the ability to inflict physical pain as a disciplinary measure.

Comments:

No area was viewed. This information was confirmed through staff and participant interviews.

4.

☒☐

Buildings are equipped with fire extinguishers, emergency exits plans and smoke detectors that are placed conspicuously.

Comments:

Fire extinguishers, emergency exit plans, and smoke detectors were present in all buildings. In addition fire sprinkler systems, panic hardware and pull fire alarms were present in certain buildings.

5.

☒☐

Any noted deficiencies in most recent Deputy Fire Marshall report have been addressed.

Comments: The Deputy State Fire Marshall has performed an inspection approximately a year prior.

6.

☐☒

Program facilities are free from any major notable safety hazards or defects.

Comments: No noted hazards or defects.

7.

☒☐

If program is required to have periodic water quality testing and septic maintenance, verify these inspections are current.

Comments: They have their own water system and have to comply with requirements and are tested monthly.

8.

☒☐

Facility contains an adequately supplied first aid kit which is maintained and in good working order.

Comments: A licensed nurse is on staff at the facility approximately 30 hours per week. First aid kit in main building, each dorm, and all vehicles. All staff are CPR/First Aid or Wilderness First Aid. Summit has an indoor pool and several staff are Red Cross trained lifeguards

9.

☒☐

Area medications are stored in a controlled area with limited access.

Comments: Medications are dispensed by dormitory staff.

10.

☒☐

Food preparation and serving areas are adequate to ensure nutritional needs of participants are met.

Comments: All areas appeared adequate.

11.

☒☐

Food preparation areas are operated in a clean and safe manner with all equipment, storage and serving tools in good working order.

Comments: All areas appeared clean. Equipment and tools seemed in good working order.

12.

☐

Vehicles used to transport participants and staff has emergency information contained in the vehicle. (Name, address, telephone of program and emergency phone numbers)

Comments: Emergency information is contained in the vehicles.

13.

☐

Verified if any newly constructed buildings or remodeling has been done with the last 18-24 months. If so, determine if building, plumbing and electrical permits were received and proper inspections done upon completion of project.

Comments: No recent construction.

☐

### Administrator Interview:

1.

Y

N

☒☐

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments:

New student's belongings are checked. They are kept in the staff office in the dormitory where they are inspected by two staff members. New students are also drug tested.

2.

☒☐

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments:

No evidence of background checks was found in the personnel files. Administration advised they have been conducting their background checks through ADT and commented a problem they have with the current PAARP system of background checking is they send in the fingerprint cards but never receive any response from PAARP whether the background check was received or whether it was a satisfactory check. A letter from PAARP advising the check was received and non-adverse would be a welcome change to the current system.

3.

☒☐

Reviewed with Administrator at least two program participant's files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments:

Kept in locked cabinet with limited access.

4.

☒☐

Reviewed with Administrator at least two program participant's files to verify that each has an individual treatment plan in place. (at least one different from above two)

Comments:

Individual plans and therapy notes were contained in the files and/or computer.

5.

☒☐

Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.



Comments: Medication log was current.

6.



Verify with Administrator that copies of all professional staff certifications are maintained on the premise.

Comments: Professional staff certifications contained in the files Inspectors examined.

Staff Interviews – combined answers of two staff:

1.

Y

N



Staff explained definition of inappropriate and appropriate behaviors of program participants.

Comments: Inappropriate behavior was explained as not following the rules or not completing school work or therapy as assigned. While working within the rules and guidelines of the program was appropriate. Staff explained program is relationship based.

2.



Staff explained acceptable and unacceptable responses to inappropriate behaviors as well as acceptable consequences to inappropriate behaviors.

Comments: Depends on the situation, something minor may just require speaking with the student. Treatment teams may get involved in more serious issues and students may be assigned work crew.

3.



Staff verified training in these areas has occurred and does reoccur at least annually.

Comments: Staff training is on-going, including AEGIS and CPI, Wilderness First Aid (WFR & WFA).

4.



Staff verified the purpose of physical labor (not for the sole purpose of punishment).

Comments: Staff indicated that physical labor for breaking rules is part of being a citizen in the community, however labor is to be a benefit to the house.

5.

☐

Staff verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments: Food, clothing and other necessities are not withheld from students.

6.

☐

Staff verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments: Staff indicated this type of behavior is not tolerated.

7.

☐

Staff verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments: Staff explained communication not withheld for punishment

8.

☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Not used

9.

☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: Staff verified medication is only dispensed as prescribed.

10.

☐

Staff verified all punishment given to a participant is done with at least two staff members present.

Comments: No physical punishment occurs. Punishments are by loss of privileges through the level system.

11.

☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: Staff verified this does not occur.

12.

☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: Staff is trained in AEGIS & CPI.

13.

☐

Staff explained use of short term time out for behavior modification methods employed at the facility.

Comments: short term timeouts are not regularly used by the program unless requested by the student.

14.

☐

Staff explained procedures for handling emergency situations such as suicide threat/attempt, assault or runaway.

Comments: Procedures include suicide watch and runaway watch, also appropriate local authorities are contacted as needed.

### Participant Interviews – combined answers of two participants

1.

Y

N

☐

Participant explained how staff deals with inappropriate and appropriate behaviors of program participants.

Comments: The students confirmed warning for minor issues and requirements to do extra chores (work crew). Stages 1-4, higher allows for more privileges such as going off campus and the clubhouse (room to hang out in by the gym). Students may be restricted from other students if being a negative influence.

2.

☐

Participant acknowledges have access to routine and emergency medical services as needed, including mental health services.

Comments: Both students agreed service are available.

3.



Verified participant received handbook outlining expectations and acceptable standards of the program.

Comments:



Participant verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

---

---



Participant verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

---

---



Participant verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments:

---

---

Y      N

☒☐

Participant verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments:

---

---

☒☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments:

---

---

☒☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services in not done.

Comments:

---

---

☐☐

Participant verified all punishment given to a participant is done with at least two staff members present. Determine if corporal punishment is used.

Comments:

---

---

☒☐

Physical or mental suffering including pain to force compliance does not occur.

Comments:

---

---

☒☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: Neither student had witnessed or experienced any incident requiring the use of  
restraint.

Y

☒

N

☐

Participant explained use of short term time out for behavior modification methods employed at the facility.

Comments: Is not a method employed.

# **Report of Inspection**

at the request of

## **The Private Alternative Adolescent Residential Program**

**Program:** Tumbleweed Runaway Program, Inc.  
505 N 24<sup>th</sup> Street  
Billings MT 59101

**Inspector:** TJ Hunt  
Jody Dalbec

**Date of Inspection:** November 21, 2016

**Date of Report:** November 22, 2016

### Site Inspection:

Tumbleweed Runaway Program has three facilities; however, an inspection was only completed on Joy's Haven. Joy's Haven is an independent living facility for homeless runaway youth, ages 16-18. Administration advised Joy's Haven is the only facility they are requesting to be licensed.

1.

Y

N

☒☐

Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

Comments: Plan of operation explained in Handbook is consistent with information provided during walk through.

2.

☒☐

The number of program participants is consistent with information submitted with application and provided by Administrator.

Comments: Application shows 0-10 participants. Joy's Haven is currently housing three.

3.

☒☐

Premise does not contain an area that could be used for corporal punishment, isolation or the ability to inflict physical pain as a disciplinary measure.

Comments: None was viewed.

4.

☒☐

Buildings are equipped with fire extinguishers, emergency exits plans and smoke detectors that are placed conspicuously.

Comments: Facility has fire extinguishers, emergency exit plans, and smoke detectors.

5.

☒☐

Any noted deficiencies in most recent Deputy State Fire Marshalls report have been addressed.

Comments: Inspectors were informed Fire Marshall conducted inspection earlier this year and no deficiencies were noted.



6.

☐

Program facilities are free from any major notable safety hazards or defects.

Comments: None observed.

7.

☐

If program is required to have periodic water quality testing and septic maintenance, verify these inspections are current.

Comments: Facility is on city water and septic system. No issues were noted.

8.

☐

Facility contains an adequately supplied first aid kit which is maintained and in good working order.

Comments: Facility contains an adequately supplied first aid kit which is maintained and in good working order.

9.



Area medications are stored in a controlled area with limited access.

Comments: Per policy, staff are not authorized to store, distribute, or administer medication to participants. A secure lock box and medication log does not exist. Participants with controlled substances are provided their own lock box and maintain a key to the box.

10.

☐

Food preparation and serving areas are adequate to ensure nutritional needs of participants are met.

Comments: All areas appeared to be adequate.

11.

☐

Food preparation areas are operated in a clean and safe manner with all equipment, storage and serving tools in good working order.

Comments: All areas appeared to be clean. Equipment and tools seemed in good working order.

12.

☐

Vehicles used to transport participants and staff has emergency information contained in the vehicle. (Name, address, telephone of program and emergency phone numbers)

Comments: Binder containing emergency information is not stored in vehicles, but is taken when utilizing the vehicle.

13.

☒☐

Verified if any newly constructed buildings or remodeling has been done with the last 18-24 months. If so, determine if building, plumbing and electrical permits were received and proper inspections done upon completion of project.

Comments: No new construction.

### **Administrator Interview:**

1.

Y

N

☒☐

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments: Contraband check not completed at admission, but regular room checks are conducted. New staff conducting searches are always under supervision. Staff explained various situations in which searches are conducted.

2.

☒☐

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments: Evidence of background checks are kept in employee files. Past fingerprint background checks were conducted by Billings Public School.

3.

☒☐

Reviewed with Administrator at least two program participant's files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments: Kept in locked file room. Appear to be in order.

4.

☒☐

Reviewed with Administrator at least two program participant's files to verify that each has an individual treatment plan in place. (at least one different from above two)

Comments: Some participant's Independent Living Plan (ILP) on file; however, federal grant auditors previously advised them to discontinue the use of these plans. Case notes are on file.

5.  
☐



Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.

Comments: No log was viewed due to current policy.

6.



Verify with Administrator that copies of all professional staff certifications are maintained on the premise.

Comments: All staff certifications are kept in a binder and maintained at the facility.

### Staff Interviews – combined answers of two staff:

1.

Y

N



Staff explained definition of inappropriate and appropriate behaviors of program participants.

Comments: Staff explained various appropriate and inappropriate behaviors of program participants.

2.



Staff explained acceptable and unacceptable responses to inappropriate behaviors as well as acceptable consequences to inappropriate behaviors.

Comments: Staff explained various acceptable and unacceptable responses to both behaviors. The disciplinary process explained is consistent with their written policies.

3.



Staff verified training in these areas has occurred and does reoccur at least annually.

Comments: Staff receives yearly training.

4.



Staff verified the purpose of physical labor (not for the sole purpose of punishment).

Comments: Physical labor is not used as a form of punishment.

5.

☐

Staff verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments: Verified by staff.

6.

☐

Staff verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments: Staff verified this practice does not occur.

7.

☐

Staff verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments: Visitation and communication with parents/guardians is never denied.

8.

☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Staff verified locked confinement is not used for any purpose.

9.

☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: Staff verified medication is not used for disciplinary purposes.

10.

☐

Staff verified all punishment given to a participant is done with at least two staff members present.

Comments: Any discipline is always done by two staff members. Discipline used is a level type written warning system.

11.

☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: Does not occur.

12.

☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: Passive restraints are not currently used. Training started earlier this year and they are going to send a person to the "Train the Trainer" training.

13.

☐

Staff explained use of short term time out for behavior modification methods employed at the facility.

Comments: This practice is employed by the facility.

14.

☐

Staff explained procedures for handling emergency situations such as suicide threat/attempt, assault or runaway.

Comments: Staff explained protocol for the above mentioned situations. This mainly involves contacting law enforcement.

### **Participant Interviews – combined answers of two participants**

The inspection only included one participant interview because the other two participants were not available at the time of the inspection.

1.

Y

N

☐

Participant explained how staff deals with inappropriate and appropriate behaviors of program participants.

Comments: Participant explained negative behavior will be dealt with in a conversation with the house manager and positive behaviors are rewarded accordingly.

2.

☐

Participant acknowledges have access to routine and emergent medical services as needed, including mental health services.

Comments: Participant agreed all above mentioned services are available.

3.

☐

Verified participant received handbook outlining expectations and acceptable standards of the program.

Comments: Participant verified handbook was received and signed.

4.

☐

Participant verified the purpose of physical labor (not for the sole purpose of punishment).

Comments: Confirmed by participant.

5.

☐

Participant verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments: Confirmed by participant.

6.

☐

Participant verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments: Staff does not engage in this practice.

7.

☐

Participant verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments: Participant verified visitation and communication with parents/guardians is never denied.

8.

☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Locked confinement rooms are not used.

9.

☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: Participant confirmed this practice does not occur.

10

☐

Participant verified all punishment given to a participant is done with at least two staff members present. Determine if corporal punishment is used.

Comments: Participant advised if it is a certain situation (personal/female) only a female staff will sit down with her; however, if it is a serious problem, two staff will.

11.

☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: Does not occur.

12.

☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: Participant has not experienced the use of passive restraints.

13.

☐

Participant explained use of short term time out for behavior modification methods employed at the facility.

Comments: Common practice by facility.

# Report of Inspection

at the request of

## The Private Alternative Adolescent Residential Program

**Program:** Wood Creek Academy  
76 Tanager Lane  
Thompson Falls MT

**Inspector:** Amber Carpenter  
William W. Wood

**Date of Inspection:** May 18, 2016

### Site Inspection:

1.

Y

N



Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

**Comments:** 12 month residential program for boys. No changes to operation.

2.



The number of program participants is consistent with information submitted with application and provided by Administrator.

**Comments:** 17 students are in residence at this time.



3.

☐☒

Premise does not contain an area that could be used for corporal punishment, isolation or the ability to inflict physical pain as a disciplinary measure.

Comments: No area was viewed. This information was confirmed through staff and participant interviews.

4.

☒☐

Buildings are equipped with fire extinguishers, emergency exits plans and smoke detectors that are placed conspicuously.

Comments: Fire extinguishers and smoke detectors where present in both houses.

5.

☒☐

Any noted deficiencies in most recent Deputy State Fire Marshalls report have been addressed.

Comments: None.

6.

☒☐

Program facilities are free from any major notable safety hazards or defects.

Comments: No major hazards noted.

7.

☒☐

If program is required to have periodic water quality testing and septic maintenance, verify these inspections are current.

Comments: Septic system pumped annually.

8.

☒☐

Facility contains an adequately supplied first aid kit which is maintained and in good working order.

Comments: First aid kit in staff office.

9.

☒☐

Area medications are stored in a controlled area with limited access.

Comments: Medications are kept in locked staff room. Access to this room is limited to certain staff.

10.

☒

Food preparation and serving areas are adequate to ensure nutritional needs of participants are met.

Comments: All areas appeared adequate.

11.

☒☐

Food preparation areas are operated in a clean and safe manner with all equipment, storage and serving tools in good working order.

Comments:

12.

☒☐

Vehicles used to transport participants and staff has emergency information contained in the vehicle. (Name, address, telephone of program and emergency phone numbers)

Comments:

13.

☐☒

Verified if any newly constructed buildings or remodeling has been done with the last 18-24 months. If so, determine if building, plumbing and electrical permits were received and proper inspections done upon completion of project.

Comments:

#### Administrator Interview:

1.

Y

N

☒☐

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments:

2.

☒☐

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments: Everything appeared to be in order.

3.

☒ ☐

Reviewed with Administrator at least two program participants files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments: Kept in administrative offices, limited access.

4.

☒ ☐

Reviewed with Administrator at least two program participant's files to verify that each has an individual treatment plan in place. (at least one different from above two)

Comments: Individual plans and therapy notes were contained in the files.

5.

☒ ☐

Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.

Comments: Medication log was current.

6.

☒ ☐

Verify with Administrator that copies of all professional staff certifications are maintained on the premise.

Comments: Professional staff certifications contained in the files Inspectors examined.

#### Staff Interviews – only one staff member available for interview:

1.

Y      N

☒ ☐

Staff explained definition of inappropriate and appropriate behaviors of program participants.

Comments:

2.

☐

Staff explained acceptable and unacceptable responses to inappropriate behaviors as well as acceptable consequences to inappropriate behaviors.

Comments:

Rewards for working their program include greater trust and privileges, there is level system.

3.

☐

Staff verified training in these areas has occurred and does reoccur at least annually.

Comments:

Staff is provided with a packet of goals and rules of the program. All staff CPR trained and get on the job training for specific issues.

4.

☐

Staff verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

Staff indicated that students do perform physical labor but that the purpose is for therapeutic purposes.

5.

☐

Staff verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

6.

☐

Staff verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments:

7.

☐

Staff verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments:

8.

☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Not used.

9.

☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: Staff verified medication is only dispensed as prescribed.

10.

☐

Staff verified all punishment given to a participant is done with at least two staff members present.

Comments: No physical punishment occurs.

11.

☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: Staff verified this does not occur.

12.

☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments:

13.

☐

Staff explained use of short term time out for behavior modification methods employed at the facility.

Comments:

14.

☐

Staff explained procedures for handling emergency situations such as suicide threat/attempt, assault or runaway.

Comments: Emergency numbers are posted.

## Participant Interviews – combined answers of two participants

1.

Y

N

☒☐

Participant explained how staff deals with inappropriate and appropriate behaviors of program participants.

Comments:

Have a level system that is affected positively or negatively based on behavior.

2.

☒☐

Participant acknowledges have access to routine and emergent medical services as needed, including mental health services.

Comments:

Yes, see therapist and have seen others taken to doctor as needed.

3.

☒☐

Verified participant received handbook outlining expectations and acceptable standards of the program.

Comments:

It is called a "resident manual" and everyone gets one when they arrive.

4.

☒☐

Participant verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

5.

☒☐

Participant verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

6.

☒☐

Participant verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments:

Both stated it is not normal for staff to lose their patience.

7. ☒ ☐ Participant verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments:

8. ☒ ☐ Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: Nothing like that exists.

9. ☒ ☐ The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services in not done.

Comments: Use level system.

10. ☒ ☒ Participant verified all punishment given to a participant is done with at least two staff members present. Determine if corporal punishment is used.

Comments:

11. ☒ ☐ Physical or mental suffering including pain to force compliance does not occur.

Comments:

12. ☒ ☐ The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments:

13. ☒ ☐ Participant explained use of short term time out for behavior modification methods employed at the facility.

Comments:

# Report of Inspection

at the request of

## The Private Alternative Adolescent Residential Program

**Program:** Galena Ridge  
20 Fox Lane  
Trout Creek MT

**Inspector:** T.J. Hunt  
Jody Dalbec

**Date of Inspection:** August 8, 2017

### Site Inspection:

The inspection was completed off-site at a fishing access site in St. Regis, Montana. The program was doing a practice day preparing for an upcoming canoe trip.

1.

Y

N

☒☐

Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

Comments:

Upon interviewing the Administrator, Paul Clark, it was found the program maintained some students year round.

2.

☒☐

The number of program participants is consistent with information submitted with application and provided by Administrator.

Comments:

At the time of the inspection, the program had two participants. This is consistent with the program's 2017 Renewal.



3.

☐☒

Premise does not contain an area that could be used for corporal punishment, isolation or the ability to inflict physical pain as a disciplinary measure.

Comments: The inspection was done off-site so none was viewed.

4.

☒☐

Review list of currently enrolled participants.

Comments: Currently two participants enrolled in program.

5.

☒☐

Interview Program Director regarding responsibilities and role of Field Director to verify quality of field activities, coordinating of field operations and compliance with applicable licensing rules while in the field.

Comments: Information obtained appeared to be in compliance.

6.

☒☐

Interview with Field Director to ensure staff members are familiar with all field program policies/procedures, field director has at least a BA or one year outdoor program experience, hold wilderness first aid and all other staff certified in first aid and CPR.

Comments: Information obtained appeared to be in compliance.

7.

☒☐

Verify staff training records include program policies/procedures, child abuse reporting and laws, low impact camping, confidentiality, medical protocols, and emergency procedures (suicide prevention, documentation, de-escalation of crisis situations and passive physical restraint, avoiding potential hazards of the expedition areas and emergency evacuation procedures).

Comments: All records appeared to be in order.

8.

☒☒

Review at least two participant's files to determine that the age of the participants is in the range of those claimed to be served in the program outline, current health history on file for participants including medications and physical examination by a licensed provider within 6 months.

Comments: Although the inspection was conducted off-site, Mr. Clark brought one participant file for the inspection. The information obtained appeared to be in compliance.

9.

☒☐

Verify medical release forms for each participant are kept with field staff providing direct care.

Comments: All records appear to be in order. For outdoor trips, they bring signed medical release forms and health insurance cards.

10.

☒☐

Verify participant to staff ratio does not exceed 20 participants to one staff.

Comments: Ratio less than 4 to 1.

11.

☒☐

Inquire as to what methods are used to ensure safe drinking water.

Comments: The program normally brings drinking water for the trips, but uses oxygen drops if needed.

### **Administrator Interview:**

1.

Y

N

☒☐

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments: Administrator explained the procedure for conducting searches.

2.

☒☒

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments: Although the inspection was conducted off-site, Mr. Clark brought one staff file for review. Information obtained appeared to be in compliance. Fingerprint cards were contained in the file.

3.

☒☐

Reviewed with Administrator at least two program participant's files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments: Information obtained appeared to be in compliance. Participant files are maintained in a file cabinet in Mr. Clark's house, which is locked and the participants are not allowed access.

4.

☒☐

Reviewed with Administrator at least two program participant's files to verify that each has an individual treatment plan in place. (at least one different from above two)

Comments: Information obtained appeared to be in compliance.

5.

☒☐

Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.

Comments: Medications are kept in Mr. Clark's house, which is locked and participants are not allowed access. Mr. Clark advised he keeps a medication administration log with the medications. If the program goes on overnight trips, the medications and the log are kept in Mr. Clark's pack.

6.

☒☐

Verify with Administrator that copies of all professional staff certifications are maintained on the premise.

Comments: Information obtained appeared to be in compliance.

### **Staff Interviews:**

Aside from Administrator, the program has only one other staff member. However, this staff member was temporarily away from the program due to a forest fire near his home. The Administrator also works hands-on as a staff member and was interviewed.

1.

Y

N

☒☐

Staff explained definition of inappropriate and appropriate behaviors of program participants.

Comments: Mr. Clark defined inappropriate and appropriate behaviors.

2.

☐

Staff explained acceptable and unacceptable responses to inappropriate behaviors as well as acceptable consequences to inappropriate behaviors.

Comments:

Mr. Clark explained acceptable and unacceptable responses to inappropriate behaviors as well as acceptable consequences to inappropriate behaviors.

3.

☐

Staff verified training in these areas has occurred and does reoccur at least annually.

Comments:

Information obtained appeared to be in compliance. Mr. Clark debriefs situations with participants with his staff.

4.

☐

Staff verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

Does not occur.

5.

☐

Staff verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

Does not occur.

6.

☐

Staff verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments:

Does not occur.

7.

☐

Staff verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments:

Does not occur.

8.

☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments:

No such area exists.

9.

☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: Does not occur.

10.

☐

Staff verified all punishment given to a participant is done with at least two staff members present.

Comments: Information obtained appears to be in compliance although Mr. Clark only has one additional staff member but both institute discipline.

11.

☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: Does not occur.

12.

☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: Information obtained appeared to be in compliance. Mr. Clark and his staff member completed MANDT training.

13.

☐

Staff explained use of short term time out for behavior modification methods employed at the facility.

Comments: Mr. Clark explained the use of short term time outs.

14.

☐

Staff explained procedures for handling emergency situations such as suicide threat/attempt, assault or runaway.

Comments: Mr. Clark explained procedures for handling emergency situations.

## Participant Interviews – combined answers of two participants

1.

Y

N

☒☐

Participant explained how staff deals with inappropriate and appropriate behaviors of program participants.

Comments:

Participants explained how staff deals with inappropriate and appropriate behaviors.

2.

☒☐

Participant acknowledges have access to routine and emergent medical services as needed, including mental health services.

Comments:

Participants agreed access to medical and mental health services is available as needed.

3.

☒☐

Verified participant received handbook outlining expectations and acceptable standards of the program.

Comments:

Participants verified receiving a handbook or other documents outlining the rules and expectations of the program.

4.

☒☐

Participant verified the purpose of physical labor (not for the sole purpose of punishment).

Comments:

Participants stated physical labor is part of the program, but not used as punishment.

5.

☒☐

Participant verified necessary food, clothing, bedding, rest, toilet use or bathing facilities are not denied to participants as a form of punishment.

Comments:

Verified these are not denied as a form of punishment.

6.

☒☐

Participant verified that verbal abuse, ridicule, humiliation, profanity, threats or other forms of degradation are not directed at participants or their families.

Comments:

Participants verified staff does not use these forms of degradation.

7.  
☒

☐

Participant verified denial of visits or communication with parents/guardians does not occur for the sole purpose of punishment (program guidelines, activities, plans or court orders may require short periods where communication cannot occur).

Comments: Participants verified this does not happen.

8.  
☒

☐

Locked confinements or placing participants in a locked room for non therapeutic purposes are not used.

Comments: No such place.

9.  
☒

☐

The administration of medication for disciplinary purposes, the convenience of staff or as a substitute for treatment services is not done.

Comments: Does not happen.

10  
☒

☐

Participant verified all punishment given to a participant is done with at least two staff members present. Determine if corporal punishment is used.

Comments: Physical punishment does not occur.

11.  
☒

☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: Does not happen.

12.  
☒

☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: Neither participants had experienced this themselves; however, one stated this would only happen if participants are endangering themselves or others.

13.



Participant explained use of short term time out for behavior modification methods employed at the facility.

Comments: "Solo" is when the participant is separated from other participants for one week. During this time, they are still able to participate in activities, but live separately.

14.

Outdoor programs:



Participant verified that student to staff ratio is no more than 20 to 1.

Comments: At the time of the inspection, there were two participants and two staff members.



# **Report of Inspection**

at the request of

## **The Private Alternative Adolescent Residential Program**

**Program:** Petty Creek Ranch, LLC  
2161 Petty Creek Rd  
Alberton MT 59808

**Inspector(s):** T.J. Hunt  
Jody Dalbec

**Date of Inspection:** March 7, 2018

**Date of Report:** March 8, 2018

Site Inspection:

1.

Y

N

☒☐

Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

Comments:

Petty Creek is a new application that required an initial inspection prior to opening for business.

2.

☒☐

The number of program participants is consistent with information submitted with application and provided by Administrator.

Comments:

Michael Morso, Administrator, advised Petty Creek will be a boy's only program with a maximum of 10 participants. There were no students enrolled at the time of inspection.

3.

☒☐

Premise does not contain an area that could be used for corporal punishment, isolation or the ability to inflict physical pain as a disciplinary measure.

Comments:

No area was observed during inspection.

4.

☒☐

Buildings are equipped with fire extinguishers, emergency exits plans and smoke detectors that are placed conspicuously.

Comments:

The building contained smoke detectors, fire extinguishers, and emergency exit plans.

5.

☒☐

Any noted deficiencies in most recent Deputy State Fire Marshalls report have been addressed.

Comments:

Fire Marshall conducted an inspection on February 14, 2018. The attached report shows noted deficiencies were corrected on February 16, 2018.

6.

☒☐

Program facilities are free from any major notable safety hazards or defects.

Comments:

None observed during inspection.

7.



If program is required to have periodic water quality testing and septic maintenance, verify these inspections are current.

Comments: Administrator stated water testing and septic maintenance was completed recently upon purchase of the property.

8.



Facility contains an adequately supplied first aid kit which is maintained and in good working order.

Comments: Administrator presented two first aid kits. One to be kept in the vehicle and the other to be kept in the facility.

9.



Area medications are stored in a controlled area with limited access.

Comments: Medications will be stored in a locked safe in the locked staff room with a medication log present. The safe and log were shown to inspectors.

10.



Food preparation and serving areas are adequate to ensure nutritional needs of participants are met.

Comments: All areas appeared adequate.

11.



Food preparation areas are operated in a clean and safe manner with all equipment, storage and serving tools in good working order.

Comments: Facility was still being brought up to operating level but the food prep area appeared to be sufficient and contained necessary food storage and equipment.

12.



Vehicles used to transport participants and staff has emergency information contained in the vehicle. (Name, address, telephone of program and emergency phone numbers)

Comments: Inspectors verified through interview with the administrator, emergency information will be contained in the vehicles used to transport participants.

13.

☒☐

Verified if any newly constructed buildings or remodeling has been done with the last 18-24 months. If so, determine if building, plumbing and electrical permits were received and proper inspections done upon completion of project.

Comments: None observed during inspection.

14.

☐☒

Montana abuse hotline number posted in area where students may have unrestricted access to report allegations of abuse.

Comments: The Montana abuse hotline was not posted at the time of inspection. Mr. Morso advised he would post it prior to opening for business.

#### Administrator Interview:

1.

Y

N

☒☐

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments: A policy and procedure handbook has been completed and provided with the application. Inspectors also examined the book on site.

2.

☒☐

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments: As this is a new application, Administrator Michael Morso, advised there are no additional staff aside from co-owner, Jason Lavigne. Mr. Morso also advised his wife will be doing administrative work.

3.

☒☐

Reviewed with Administrator at least two program participant's files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments: There are no participants at this time.

4.



Reviewed with Administrator at least two program participant's files to verify that each has an individual treatment plan in place. (at least one different from above two)

Comments: There are no participants at this time.

5.



Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.

Comments: Medication log is not in use at this time – awaiting participants.

6.



Verify with Administrator that copies of all professional staff certifications are maintained on the premise.

Comments: Training will be provided once staff has been employed.

Staff Interviews – combined answers of two staff:

There are no staff at this time – awaiting licensure.

Participant Interviews – combined answers of two participants:

There are no participants at this time – awaiting licensure.



FRENCHTOWN RURAL FIRE DISTRICT  
Business Inspection Form



**R3**

Type of Business: <b>2 - GROUP HOME</b>	Date: <b>2-14-18</b>	County:
1. Occupancy Name: <b>PETTY CREEK RANCH LLC</b>	2. Street Address: <b>261 PETTY CREEK</b>	
3. Responsible Party: <b>JASON LAVIGNE</b>	City/State Zip: <b>ALBERTON, MT 59820</b>	
Phone: <b>406-239-0848</b>	4. Property Owner: <b>L &amp; M LLC</b>	
5. Licensing Agency Contact: <b>PAARP - CINDY</b>	Phone: <b>406-239-0848</b>	
Address/Phone:	6. Occupancy Classification: <b>R3</b>	
	7. Occupancy Load:	
Length <b>32'1"</b>	Width <b>20'3"</b>	Stories <b>2</b>
Basement <b>g</b>	Sprinkler System <b>N</b>	Sprinkler Controls Location <b>N</b>
Standpipe	Standpipe Location	Square Feet <b>2800</b>
Alarm System <b>N</b>	Smoke Detection System	

**V = VIOLATION**

STANDARDS	CODE	V	STANDARDS	CODE	V
<b>ELECTRICAL</b>			<b>KITCHEN</b>		
Open Electrical Box/ Exposed Wiring	605.6	<input checked="" type="checkbox"/>	Lacking Hood System	609	
Extension Cords As Permanent Wiring	605.5		Accumulation of Grease	609.3.3.2	
Storage Too Close to Electrical Equipment (36")	605.3		Hood System Not Serviced	609.3.4	
<b>EXITING/ EGRESS</b>			Controls Obstructed	609	
Means of Egress Obstructed	1030.2		Type K Extinguisher	904.2.1	
Exit Locked	1030.2		<b>FUEL DISPENSING</b>		
Combustible Storage in Hallway/Stairwell	315.2.2		Supervision of Dispensing	2304.1	
<b>EXIT SIGNS</b>			Emergency Shut Off	2306.7.4	
Exit Sign Inoperable	1030.4		Emergency Disconnects	2302.2	
Emergency lighting inoperable.	604.3		<b>HOUSEKEEPING</b>		
<b>FIRE EXTINGUISHERS</b>			Combustibles Stored in Electrical Mechanical Room	315.2.3	
Fire Extinguishers Not Present	906.1		Combustible Materials Not Cleaned Up	315.2	
Fire Extinguishers Not Properly Mounted	906.7.1		Oil Receptacles Not Stored in Listed Container	304.3.1	
Fire Extinguisher Inspection Past Due (1 year)	906.2		Storage Too Close to Sprinklers (18"min)	315.2.1	
Fire Extinguisher Obstructed or Obscure	906.6		Storage Too Close to Ceiling (24"min)	315.2.1	
Service Station Extinguisher Not Minimum	2205.5		Combustible Waste Accumulation/Fire Hazard	304.1	
<b>FIRE PROTECTION SYSTEMS</b>			Combustible Storage Too Close to Heat Source (36")	315.2	
FDC Damaged or Missing Caps	906.1		<b>ACCESS AND PREMISES</b>		
FDC Not Accessible	912.3		Visible Address Number/Sign	505.1	
Sprinkler Control Valves Not Locked	901.6.1		Combustible Vegetation	304.1.2	
Standpipe Inspection Past Due (1 year)	901.6.1		Vehicle Impact Protection	312.1	
Fire Alarm Inspection Past Due (1 year)	901.6.1		Clear Space Around Hydrant	507.5.5	
Smoke Alarms Inoperable	906.6.1		<b>GENERAL</b>		
<b>HAZARDOUS MATERIALS</b>			Fire Drills	404/405	
Flammable Liquids Stored Near Exits	3404.3.3.3		Fire Doors	1008	
Flammable Liquids (>10 gallons) Not in Cabinet	3404.3.4		Occupancy Load Sign	1004.3	
Compressed Gas Containers Not Secured	3003.5.3		<b>KEY LOCK BOX/ KNOX BOX</b>		
LPG Gas Stored in Basement	3809.7		Key Lock Box Present	506.1	
Location Of Containers	3804.1		Keys in Key Box Inoperable	506.1	
Storage	2704.1		Keys in Key Box Not Labeled	506.1	
MSDS Required	2703.4				
HMIS/HMMP Required	407.6				

**REMARKS**

**BUILT IN 2005**

**NEED TO INSTALL ELECTRICAL OUTLET PLATES ON 2 OUTLETS, 1 IN STORAGE CLOSET DOWN STAIRS AND 1 IN MECH. ROOM**

**ELECTRICAL PLATES INSTALLED - CORRECTED ON 2/16/18 - NO VIOLATIONS**

You are hereby notified to remedy the conditions designated above immediately. We will re-inspect within **5** days from the date of service of this notice. If at the expiration of said time, the same conditions exist and no cause for the same has been shown, further action will be taken, as law requires

INSPECTED BY

2-14-18  
DATE

OWNER/EMPLOYEE



# **Report of Inspection**

at the request of

## **The Private Alternative Adolescent Residential Program**

**Program:** Selkirk Outdoor Leadership & Education, Inc. (SOLE)  
1255 Meadowood Road  
Sandpoint ID 83864

**Inspector:** T.J. Hunt

**Date of Inspection:** May 8, 2018

**Date of Report:** May 9, 2018

### **Background**

SOLE is based in Sandpoint, ID and offers a variety of outdoor programs for different ages. These programs are conducted in Montana and Idaho. SOLE's "*Journey Experiences*" program, which operates in Montana, is the specific program licensed by the board. This outdoor program is for adolescents 13-17 years of age needing short-term behavioral intervention with focus on character and leadership development.

Attempts were made to schedule an onsite inspection in 2017 but were unsuccessful due to scheduling and the limited amount of Journey Experiences conducted by SOLE each year.

SOLE Executive Director, Dennison Webb, was contacted on May 1, 2018 to inquire about scheduling an on-site inspection. He indicated they currently did not have any adolescent Journey Experiences scheduled for 2018. Mr. Webb agreed to discuss Journey Experiences telephonically in lieu of an onsite visit for the time being.

During Mr. Webb's telephonic inspection on May 8, 2018, he indicated Journey Experiences normally take place from June to September depending on the snow levels. They base out of Trout Creek, MT and the programs operate in the Cabinet

Mountains. The length of the trip depends on the individual. The longest trip which took place was 16 days.

Mr. Webb reported they previously have conducted Journey Experiences but were for participants 18 years of age and older. Mr. Webb indicated he was currently working with a family from Nevada to potentially schedule a Journey Experience. If a Journey Experience with an adolescent youth is scheduled he will notify Inspector Hunt to schedule an on-site inspection. Mr. Webb expressed he desires to have the board inspectors in the field to observe them.

The following information regarding SOLE's Journey Experiences program was obtained from Mr. Dennison.

1.

Y

N



Plan of operation as described in application fits with the appearance of the operation as laid out during walk through.

Comments: Mr. Webb reported the only change made to the program dealt with the clientele they accept into the program. They will not enroll participants with suicidal ideation or a severe behavioral diagnosis and are focusing on more high functioning autistic & ADHD participants.

Sole has also expanded its Journey Experiences to participants ages 18 years of age and older.

2.



The number of program participants is consistent with information submitted with application and provided by Administrator.

Comments: No participants enrolled at the time. Mr. Webb will notify Inspector Hunt if a Journey experience is scheduled.

3.



Interview Program Director regarding responsibilities and role of Field Director to verify quality of field activities, coordinating of field operations and compliance with applicable licensing rules while in the field.

Comments: Information obtained appeared to be in compliance.

4.

☐

Interview with Field Director to ensure staff members are familiar with all field program policies/procedures, field director has at least a BA or one year outdoor program experience, hold wilderness first aid and all other staff certified in first aid and CPR.

Comments: Information obtained appeared to be in compliance.

5.

☐

Verify staff training records include program policies/procedures, child abuse reporting and laws, low impact camping, confidentiality, medical protocols, and emergency procedures (suicide prevention, documentation, de-escalation of crisis situations and passive physical restraint, avoiding potential hazards of the expedition areas and emergency evacuation procedures).

Comments: Mr. Webb reported staff are well experienced in outdoor training and are trained in CPR and First Aid. Staff understand the laws of child abuse and are constantly evaluated.

6.

☐

Verify medical release forms for each participant are kept with field staff providing direct care.

Comments: Mr. Webb advised when a youth is enrolled in the program they provide the parents with a participant packet which is to be completed. This packet goes with them out in the field and contains medical information including releases.

7.

☐

Verify participant to staff ratio does not exceed 20 participants to one staff.

Comments: Mr. Webb reported a 2 staff to 1 youth ratio is utilized.

8.

☐

Inquire as to what methods are used to ensure safe drinking water.

Comments: The program utilizes iodine tablets and filter systems.

9.

Y

N

☒☐

Administrator explained policy for contraband check, including the circumstances in which searches will be conducted and the training of staff conducting search.

Comments: Administrator explained the procedure for conducting searches.

10.

☐☐

Reviewed with Administrator at least two personnel files of employee's to verify background checks are on file and fingerprint checks have been performed.

Comments: A staff file was not reviewed but Mr. Webb indicated background checks are completed.

11.

☐☐

Reviewed with Administrator at least two program participant's files to verify they are kept within accordance of programs policy and federal and state laws for privacy.

Comments: A participant file was not reviewed but Mr. Webb advised staff and participant files are kept locked.

12.

☒☐

Review medication dispensation log to verify that kept up to date including information on missed or refused dosages and medication changes.

Comments: Mr. Webb indicated participant medications are kept with staff in the field. Medications are administered by staff and mouth checks are completed.

13.

☒☐

Physical or mental suffering including pain to force compliance does not occur.

Comments: SOLE does not use physical force.

14.

☐

The use of passive restraint is explained and falls within the program rules (only used in a situation when an imminent threat to the participant, staff or others and only by trained staff – CPI and MANDT).

Comments: Mr. Webb stated SOLE uses CPI & PCS.